Continuity of Care with Transition Specialists Program (CCTS) Transitioning from Colorado Mental Health Institutes.

Program Background:

The current behavioral health system lacks adequate capacity to deliver intensive community-based behavioral health services for clients who have been committed/certified/ or are voluntarily receiving emergency-stabilization behavioral health treatment services.

The Office of Behavioral Health identified the need for an increase in service capacity to more seamlessly address the service needs of those individuals who have been committed/certified/ or are voluntarily receiving emergency stabilization behavioral health treatment services. Additionally, the Department through its C-Stat performance improvement initiative has identified as of October 4, 2012, 32 individuals who were in the custody of the Colorado Mental Health Institutes and had significant barriers to discharge that included:

- 1. The limited availability of intensive treatment options that meet the needs of this population;
- 2. Forensic history that makes it difficult to find a placement option for the client;
- 3. Availability of housing options;
- 4. A lack of adequate and intensive long-term care management assistance to proactively mitigate setbacks (treatment, daily living and/or forensic challenges).

Program Description and Services:

The Office of Behavioral Health has contracted with Behavioral Healthcare, Inc (BHI) through a competitive bid process to create the Continuity of Care with Transition Specialists Program (CCTS) effective April 2014.

- The program will have seven (7) specifically designated behavioral health transition specialists that assist clients and communities statewide in managing the transition from hospitalization to less restrictive alternatives, employing a wraparound services approach.
- The behavioral health transition specialists will assist adult and juvenile clients in accessing services and benefit acquisition, coordinating various services and funding sources, identifying and strengthening formal and informal community resources, and mobilizing helping networks.
- The supports provided by the specialists will complement and enhance the services provided by Assertive Community Treatment (ACT) providers.
- The Transition Specialists will facilitate community reintegration and manage funds for wraparound services which are not otherwise supported with insurance or other funding sources for persons transitioning from the two state mental health institutes.
- Transition Specialists will work with transitioning individuals 30 days prior to their discharge from the institutes and for up to 60 days after their return to their communities.

Program Goals:

Outcomes will be based on Office of Behavioral Health C-Stat measures. The following measures will be specifically targeted for the CCTS program:

- A. Statistically significant reductions in the 180-day readmission rates for civil patients at the two Colorado Mental Health Institutes.
- B. Statistically significant reductions in the number of individuals determined to be ready for discharge from the two Colorado Mental Health Institutes who are placed on a wait list to be transitioned to the community.
- C. 95% of individuals will be successfully engaged in services with their CMHC. This measure is met by the individual receiving at least one service on four different days within the first 45 days of their admission or return to the community mental health center. CCAR and Encounters data submitted by the Community Mental Health Center to the Office of Behavioral Health and the Department of Health Care Policy and Financing are used to track this measure.

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